

The Physician

Priest, Craftsman or Philosopher?

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The poet Tennyson once wrote that to know the nature of a flower would be to know the nature of God and man. Without drawing a parallel between the physician and the flower, a thesis I would have difficulty in defending, I can nevertheless proceed by analogy to the statement that to understand the various roles that the physician has played in the past would be to understand a great deal about the civilizations in which he lived. The physician has always been a kind of index of his times; and with the rise and decay of civilizations the physician has appeared in many guises. A study of his part in society would fill a good-sized volume, and would, I believe, be a contribution to the history of ideas.

I have attempted the first steps of such a study and, while much research remains to be done, I can report the emergence of a rather curious basic pattern which seems to reproduce itself throughout the world and recorded time. The roles in which the healer has appeared seem to fall into three main subdivisions: the priest, the craftsman and the philosopher. Time and time again, as national cultures have sprung up and died, we find these three characteristics of the medical man predominating, either paralleling each other or succeeding each other in slow cycles. In some civilizations, the physician spoke with divine authority in his words; in some he was a humble slave like any other who attended to his master's material needs; but, by and large, within this wide range, the physician may be

classified as primarily priest, craftsman or philosopher.

The key to any such system of classification must lie in the following questions as to what disease is: Is it the punishment of the gods? Is it caused by sin? Is disease the result of defiance of the laws of nature? Is it a disharmony of humors or a stagnation of atoms? When we realize that at one time or another in history the answer to each of these questions would have been "Yes," we can see that the philosophy of medicine has come a long way. To the modern physician such questions are of no concern. His interest in the aetiology of disease is restricted to the study of biological processes and their pathological changes, for they alone determine diagnosis and treatment. The modern physician does not judge or condemn—he simply attempts to cure.

The concept of disease as a biological process is relatively new, however, and is restricted to the civilized parts of the world. In the early days of the art of healing, disease was a mystery that defied uniform explanation. It is my thesis today that there were three main points of view with which the physician approached the medical arts, and I should like to consider them one by one.

In casting about for a civilization and an era that might illustrate the evolution of the pattern I have postulated, I have found that my purpose would be best served by a consideration of the physician of ancient Greece. It is within the framework of that time and place that the process of change and development is most clearly defined.

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The origin of the connection between the priest and medicine is too well known to need elaboration. Everyone is familiar with the figure and function of the tribal shaman, the medicine man of the American Indian, the Biblical Levite and the Egyptian exorcist. In general one can say that the priest functioned as a healer among all those peoples who held the belief that disease and superhuman influences are closely connected.

The First Specialists

In early priestly medicine all gods were credited with the power of healing. The next step was the singling out of a specific god, whose only function it was to heal ills. The first such specific medical god to be recognized was Imhotep, who lived around 2900 B.C. his fame is obscured by the figure of Asklepios, the Greek god of medicine; and it is in Greece that we can best observe the transfer of the power of healing from an accepted hierarchy of deities to one specifically created to monopolize that function.

Originally, it appears, Apollo was looked upon as the sender of the plague. It was natural, therefore, to implore him not to send it and to pray to him for cure once the plague had struck. From the plague Apollo's connection with disease was extended to cover all physical afflictions, some of which later became the domain of other deities. Thus Artemis was the protectress of women and children; Hygeia was the goddess of health; Panacea the healer of all ills, and Aphrodite the guardian of sexual life. In addition to these Poseidon, Hera, Pan, Dionysius, Pluton, Persephone and Cerberus were venerated as healers who could cause as well as avert disease. This distribution of medical functions grew in complexity, until they were combined once more in the temple of one god, Asklepios, the god of healing.

Nothing is known about the earthly existence of Asklepios beyond the conjecture that—like Imhotep—he too was a highly respected priest-physician, and that, instead of praying through him to the gods, the people began to pray to him as a god. The exact time when this deification occurred is not known, but it is believed that the cult had existed for many centuries before it reached Athens in 429 B.C. The greatest centers of the cult were in Epidaurus, Cos, Pergamos and Tricca. By the time of Alexander it is estimated that there were at least 300 Asklepiian temples in Greece.

Judging by the temples that have been excavated in Greece and Asia Minor, it is obvious that the temple architects were very much aware of the healing effect of pleasing surroundings and gentle climate. Some of the temples were built near mineral or hot springs. From the layouts of the Asklepieia near Epidaurus and Cos we gather that care was taken to divert the patients' minds from their ailments, for close to the magnificent temples there were gymnasia and pleasure grounds for festivals.

In the absence of any priestly records concerning the rules of procedure involved in the worship of Asklepios, our picture of the ceremonies used in healing must be reconstructed from a sizable collection of inscriptional data. These inscriptions, dealing with some 40 cases of healing, originally formed a part of a colonnade, which was found in 1883 in the remains of the Asklepiian temple at Epidaurus.

Sleep Healing

From these inscriptions and the temple layouts we gather that the patient was brought to the temple as a suppliant. He fulfilled certain preliminary rites, which probably consisted of ablutions, fasting and the making of sacrifices to Asklepios. Afterwards he was taken to the *Abaton*, a sacred place within the temple, where the incubation, or temple sleep, took place, and finally—if one is to believe the inscriptions—the patient awoke completely cured.

Many hypotheses have been advanced concerning the methods used to effect these cures. Some believe that the priests impersonated Asklepios and spoke to the half-dreaming patients, others think that the priests even went so far as to perform surgical operations while the patients slept, and still others maintain that the majority of the temple patients suffered from hysterical afflictions and that the cure was generally effected through hypnotic suggestion. At any rate, it appears to be fairly certain that Asklepiian medicine contained elements of what is now known as psychosomatic therapy. The reading of a few of the cases seems to indicate that all three methods, *i.e.*, hypnotic suggestion, impersonation of the god and actual surgery were probably employed with much dexterity and discrimination.¹

Insription 3. A man, whose fingers with the exception of one were paralyzed, came as a suppliant to the

god. While looking at the tablets in the temple, he expressed incredulity regarding the cures and scoffed at the inscriptions. But in his sleep he saw a vision. It seemed to him that he was playing at dice below the Temple, and was about to cast the dice, [when] the god appeared, sprang upon his hand, and stretched out his [the patient's] fingers. When the god had stepped aside it seemed to the patient that he could bend his hand and [he] stretched out all his fingers one by one. When he had straightened them all the god asked him if he would still be incredulous of the inscriptions on the tablets in the Temple. He answered that he would not, [and the god said to him:] "Since, then, formerly you did not believe in the cures, though they were not incredible, for the future your name shall be 'Incredulous.'" When day dawned, he walked out sound.

Inscription 4. Ambrosia of Athens, blind of one eye. She came as a suppliant to the god. As she walked about in the Temple, she laughed at some of the cures as incredible and impossible that the lame and the blind should be healed by merely seeing a dream. In her sleep she had a vision. It seemed to her that the god stood by her, and said that he would cure her, but that in payment he would ask her to dedicate to the Temple a silver pig, as a memorial of her ignorance. After saying this, he cut the diseased eyeball, and poured in some drug. When day came, she walked out sound.

Inscription 16. Nikanor, a lame man. While he was sitting wide awake, a boy snatched his crutch from him and ran away. But Nikanor got up, pursued him and so was cured.

Inscription 27. A man with an abscess in his abdomen. When asleep in the Temple he saw a dream. It seemed to him that the god ordered the servants who accompanied him to grip him and hold him tightly, so that he could cut open his abdomen. The man tried to get away, but they gripped him and bound him. . . . Thereupon Asklepios cut his belly open, removed the abscess, and after having stitched him up again, released him from his bonds. Whereupon he walked out sound, but the floor of the Abaton was covered with blood.

These are just a few of the many instances of healing that have been recorded among the inscriptions. I believe, however, that they are sufficient to illustrate the peculiar character of Asklepiian medicine and its differences from religious healing in the traditional sense. First of all, in spite of the fact that priests performed the curative rites, there is no mention of any supernatural or divine origin of the affliction, nor are the Asklepiian priests interested in the patients' sin or sense of guilt. The second point, as striking as the first, is the attitude of the patients themselves. It should be presumed that a person who went to one of the Asklepieia in order to submit to the awe-inspiring rites of a temple

cure, would arrive at the temple with such preconceived notions of its efficacy that there would be no room for doubt in his mind. And yet, two of the cases quoted above emphasize the expression of scepticism on the part of the patients, a scepticism which they were not afraid to utter, even in the presence of priests. It is, of course, possible that the inscription writers exaggerated the element of disbelief in order to make the cures appear all the more miraculous and in order to discourage disbelief in later suppliants who read the inscriptions.

But if it was true that persons with grave afflictions came to an Asklepiian temple with unconcealed doubt—why then did they come at all? Why did they not go to one of the profane healers who abounded in ancient Greece? This question is difficult to answer and yet various suppositions come to mind. The most obvious possibility is that these patients visited the temples because of the great reputation the Asklepiian priests had acquired during the centuries of their practice, and that they may have expressed doubts in order to forestall any later disappointment. But it is also possible that the patients had already visited other healers without being cured by them. And, thirdly, it is conceivable that the non-religious doctor had declined to undertake the treatment.

Physician's Choice

This last possibility may sound extraordinary in the face of our concept of the art of healing; and yet, in antiquity it was neither uncommon nor was it considered malpractice. In the *Edwin Smith Surgical Papyrus*, an Egyptian medical treatise from around 1500 B.C., we read of three different attitudes which the Egyptian physician could assume after having made his diagnosis; he could say: This is "a disease which I shall treat," or he could say: This is "a disease with which I will contend," and lastly he could say: This is "a disease which I shall not treat."

Like his older Egyptian colleague, the Greek physician too could select the case he wished to treat and decline those that appeared hazardous. In the treatise *On the Art*, which is generally attributed to Hippocrates' authorship, we read:

In general terms, [medicine] is to do away with the sufferings of the sick, to lessen the violence of their diseases, and to refuse to treat those who are overmastered by their diseases, realizing that in such cases medicine is powerless.

¹These inscriptions are quoted from *Asclepius: A Collection and Interpretation of the Testimonies*, by EMMA J. EDELSTEIN and LUDWIG EDELSTEIN, (The Johns Hopkins Press, Baltimore, 1945. Vol. 1, pp. 230, 233, 235.) On this occasion I should also like to state that many thoughts and conclusions in this paper were inspired by Dr. Ludwig Edelstein's lectures at the Institute of the History of Medicine, The Johns Hopkins University. I acknowledge this indebtedness with gratitude.

Kindly explanations for such refusals would be that the Greek physician knew his limitations, or that he recognized in grave illness the will of the gods, in which he did not wish to interfere; all of this may have been true; but an additional and possibly the strongest reason is that the Greek physician was greatly concerned with his reputation and did not wish to ruin it with an unsuccessful treatment. In spite of our amazement at such an attitude, we must realize that this seemingly unphilanthropic physician was a faithful representative of Hippocratic medicine, and that his negative attitude toward incurable afflictions was thoroughly in conformity with the Hippocratic precepts.

But, before turning from the Asklepien priest-healer to Hippocratic medicine, it might be well to mention the few facts that we know about Hippocrates' life. The scanty information that we have must be pieced together from the Platonic dialogues and from a biography written by Soranus in the second century A.D., which incorporates most of the data then available. According to these data, Hippocrates was born in 460 B.C. on the island of Cos; tradition agrees that he died at 104 years of age. This long span of life may simply be a compliment to the great physician and cannot be accepted as a fact.

All biographical references agree that Hippocrates traveled over much of Greece, and that he was the outstanding representative of the Coan school of medicine which flourished at the same time as the neighboring school of Knidos. This is all that we know about the Father of Medicine. We also do not know how many of the 72 books contained in the *Corpus Hippocraticum* were written by Hippocrates himself. But neither biographical nor bibliographical certainty are necessary for the scope of this paper, since I wish to discuss not Hippocrates himself, but the Hippocratic physician as we see him through the writings of the Hippocratic *Corpus*.

The Physician as a Craftsman

Of importance, however, in this respect is the fact that Plato refers to him twice as *Asklepiad*. By some, this appellation was held to mean that Hippocrates was a descendant of a family that traced its lineage to the god Asklepios. But it is more likely an indication that his ancestors belonged to an ancient medical guild. This latter supposition seems to be borne out by the fact

that the Hippocratic doctor was a craftsman, that his social position was that of a craftsman and that his attitude toward his profession was that of a craftsman.

Even Homer, from whose poems we derive our earliest knowledge of Greek secular physicians, describes them as "craftsmen of the people." The Hippocratic writings show us the craftsmen at work. The most striking example is the famous Hippocratic Oath. It defines a guild system with a master-apprentice relationship, restricting the profession to those who have taken an oath and giving free instruction only to those who are descendants of other physicians.

A Practical Ideal

The medical craftsman, unlike the modern physician, had no proof of a completed course of studies in the form of a diploma or a degree; he was an itinerant artisan who had to sell his services and prove his worth whenever he arrived at a new location. His highest ambition was to achieve fame which would precede him to every locality he reached and endure until he returned to it in the course of his wanderings. In this pursuance of fame, all moral and professional mistakes were to be carefully avoided. The provisions of the Oath solved doubtful questions of etiquette and also provided the physician with a code of ethics which is still respected by the medical profession.

To abide by medical ethics was especially important in Greece where the itinerant craftsman was completely free from external discipline. A small Hippocratic tract, entitled *Law*, states: "Medicine alone in our States has been made subject to no penalty, except dishonor, and dishonor does not wound those who are compacted of it."

Thus, in the absence of rigid laws, such as the Code of Hammurabi and its severe punishments for malpractice, the physician was responsible only to his patients. But, since his livelihood depended upon the good-will of the patients, their judgment was of supreme importance. Hence we gather that the Hippocratic work *Prognostic* was written not entirely out of scientific interest, but rather to help the physician safeguard himself from fatal mistakes. It was also frankly advertised as a means of gaining reputation. In spite of these mercenary purposes, how-

ever, *Prognostic* must have contributed greatly to prevailing medical knowledge, since it deals extensively with the symptomatology of disease. The following quotation will illustrate this point:

It is in my opinion a most excellent thing for the physician to practice forecasting. For by discovering and announcing independently, in front of his patients, their present condition, the events that have led up to it, and those that are going to follow, also by pointing out what the patient has omitted to state, he [the physician] will gain an enhanced reputation for understanding illness, and so men will be ready to entrust themselves to him. Treatment also will be best carried out by him if he already knows what course the existing malady is going to take.

For it is impossible to make all sick people well—that would be still better than foretelling the course of their illness. But men do, as a matter of fact, die; some through the severity of their disease, before the doctor is called in—some immediately, some living on for a day, others a little longer, before the physician can bring his art to bear on the illness in question. Hence we must know the nature of these diseases, how far they are superior to the bodily powers. In this way one will justly gain a reputation and will be a good physician; one will indeed be better able to save those capable of cure if he has made up his mind long beforehand in each case, and no blame will attach to him if he has already foreseen and announced who is to die and who is to be preserved.²

While *Prognostic* deals with the past, present and future of disease, another tract, *Airs, Waters and Places*, deals with the influence of environment on the organism. Here the doctor is instructed to study the locality in which he wishes to practice, in order to familiarize himself with its climate, its water supply, its vegetation and the disease endemic to the particular region. The writer of *Airs, Waters and Places* also points out the importance of studying the effect of climate on racial constitution and characteristics. The chapter dealing with the Scythians is of special interest, for it epitomizes the Hippocratic concept of the cause of disease and represents a significant departure from the views of Herodotus, who wrote on the same subject. In describing the Scythian affliction of impotence, Herodotus attributed it to the wrath of an offended goddess, while the Hippocratic author holds the opinion that all diseases are equally divine or equally natural. The same view of a natural cause of disease is expressed in another work, *Sacred Disease*. The disease here referred to is epilepsy, which up to then had been regarded as a divine visitation.

²Hippocrates: "Prognostic" in *Greek Medicine*, by A. G. Brock. (London, 1929, pp. 84-85)

Health: the Four Humors in Balance

But what was the Hippocratic concept of disease, if it was not of divine origin and if—as in the book *Ancient Medicine*—the Hippocratic writer also dissociated himself from the prevailing concepts of the philosophers? What were the causes that to an itinerant craftsman appeared natural? We have already seen that geographical and climatic conditions were held to be responsible for diseases. But even greater stress was laid upon the dangers of faulty diet. Three Hippocratic writings, *Ancient Medicine*, *Regimen in Acute Disease* and *On Regimen*, are devoted to the question of diet. This stress on diet is the logical consequence of the Hippocratic concept of disease which had been schematized into a very simple pattern.

According to this pattern any internal disease was simply a dyscrasia—a disharmony—of the four humors. These four humors were phlegm, blood, yellow bile and black bile. Man was healthy if these four humors were well blended. If isolation or predominance of one humor occurred, the result was disease. The Hippocratics had a profound belief in the *vis mediatrix naturae*, the healing power of nature, but the doctor was called upon to support nature and this he did by prescribing a suitable regimen. Yet the Hippocratic doctor went further than the application of diet to disease. Since health was but a precarious balance of the humors, in order to preserve this balance the healthy as well as the diseased had to submit to lifelong dietary rules.

This insistence on a regimen for the healthy met with little response in the Greek city states. But when the Greek cities lost their independence, many of the prominent citizens who had up to then been occupied with public affairs, became idle. Thus it was in the 4th century B.C. that the physicians succeeded in introducing their rules into general life. A similar development can be observed in Rome, although Greek medicine was adopted in Rome in spite of Cato's fervent opposition. The Romans during the days of the Republic rejected the idea of a regimen for the healthy and agreed with Celsus who proclaimed that whoever was healthy should not follow any rules, for he had not time to do so. Nevertheless, when Rome declined in strength the Romans too submitted to the Greek dietetic rules.

In modern terminology the following of a strict regimen became the "occupational therapy" for

the idle rich. The Greek physician deliberately fostered this preoccupation with health, since it increased his earnings. A health-conscious aristocracy became dependent upon the physician; it had to submit to his dictates, in spite of the fact that, as a craftsman who worked for his living, he belonged to a lower stratum of society.

The Craftsman Turns Philosopher

The Hippocratic doctor did not conceal his desire to earn money, since the motive of philanthropy, with the modern connotation of charity, was not connected with the art of healing until the first century A.D. Consequently the medicine practiced in antiquity was entirely for the upper classes who were able to pay for treatment and for the luxury of having a physician regulate their lives even when they were healthy.

Medicine continued in this vein, in spite of Plato's fervent opposition to this inordinate emphasis on health. For Plato maintained that in all well-ordered states the individual had an occupation to which he had to attend, and had therefore no leisure to spend in continually being ill. Excessive care of the body he considered contrary to the interest of the State and detrimental to the development of the individual. The physician, he argued, had invented "lingering death."³ Although these particular arguments did not produce an immediate change, philosophy gradually succeeded in invading the practice of medicine, and in creating a new type of physician.

It was in Alexandria that the craftsman turned philosopher. The time was the early 3rd century B.C., and the philosophers indirectly responsible for this change were Plato, Aristotle and Theophrastus. Curiously enough, the invasion of medicine by philosophy came by way of human anatomy, which, after the first century of our era, was condemned to be the least philosophical and therefore the most neglected of all medical disciplines.

Until the time of Hellenistic, or Alexandrian, medicine, the study of human anatomy had not entered the realm of the Greek physician. The sculptures of Praxiteles reveal that the ancient Greeks were observant of the surface anatomy of the human body; but the study of internal anatomy had been left to chance observations,

such as were offered by the occasional sight of a severely wounded gladiator, and was not pursued as a course of medical training. According to the views of the Hippocratic physician, further knowledge of the structure of the human body was not necessary, since it could be inferred from the study of animals.

The philosophers of the period went even further than the physicians in their analogical statements and arrived at conclusions which show a striking similarity to those of the early Chinese thinkers. Everything in the universe, they reasoned, was of the same composition as the universe itself; hence conclusions about the nature of the universe could be applied to all its creatures—and thus also to man. Aristotle challenged the principle of analogical deductions, stating that metaphors, while useful in poetry, were unsatisfactory as scientific theory.

The Study of Human Anatomy

Important as was the refusal of Aristotle and Theophrastus to make inferences from the structure of the animals and apply them to that of man, it was not by itself sufficient to help the Greeks overcome their inherent distaste for dissection of the corpse, for, until the 4th century B.C., the Greeks shared the belief of many ancient peoples that the human body housed the soul and should remain inviolate even after death. But in the 4th century B.C. Plato destroyed this belief. In his dialogue *Phaidon*, the condemned Socrates comforts his friends about his death and burial and assures them that corpses are but images of the dead, and that the real self, the immortal soul, departs to the presence of other gods.⁴ Aristotle and, later, Epicurus adopted period, the Hellenistic physicians were disciples of philosophers. The medical craftsman was rethese Platonic theories and a new general attitude towards life and death was thus created. Dissection of the human body ceased to be anathema to the philosopher and thus the study of human anatomy became possible.

Unlike the earlier physicians of the Hippocratic placed by the philosopher, because only as a philosopher could the physician achieve a new approach to the problem of a causal explanation of disease. The priest-healer took for granted that disease was the expression of divine power; the

³*The Republic of Plato*, translated by BENJAMIN JOWETT, 3rd edition (Oxford, 1927), Book III, pp. 404 E—408 B.

⁴"*Phaidon*" (115 c-e): *Plato*, translated by H. N. FOWLER, (Loeb Classical Library, I. 393-395).

medical craftsman followed the concept of disease as a dysfunction of a mechanical law: but when the philosophers became practicing physicians they realized that disease was directly related to the structure of the human body. With the search for causal explanations, as expressed in the study of anatomy and physiology, the physician had become a scientist and thus a philosopher—for science formed the basis of philosophy.

Because they reasoned from “principles” (*dogmata*), the physicians of Alexandria were known under the term “Dogmatic School.” Because they *reasoned*, they were also called “Rationalists,” a term which should be preferred, as the word “dogmatic” has acquired a connotation which is not applicable to these Alexandrian scientists. The Rationalists’ study of human anatomy and physiology was such a striking departure from tradition that soon opposing views were heard. Another school arose in Alexandria (Philinos, 250 B.C.) that denied the validity of causal explanation. But it is significant that the dissenting physicians also claimed a philosophical background. Thus the Empiricists, as the adherents of the opposing school were called, fortified themselves with the arguments of the Greek sceptics, especially of Pyrrho of Elis (about 350 B.C.). Like Pyrrho, the Empiricists rejected logical faculties and laid stress on the incomprehensibility of things. As applied to the practice of medicine, the Empiricists rejected all causal explanation of disease. For the treatment of disease they admitted three steps only: 1. Their own experience; 2. the experience of others; and (if both proved to be insufficient) 3. conclusion by analogy.

Somewhat later, in the first century B.C., a third school was formed in Rome that vigorously rejected the Dogmatists’ search for causes as well as the Empiricists’ reliance upon experience. This new school derived its philosophical background from the atomistic theories of Epicurus, and its exponents were called “Methodists.” The Methodists, in turn, were followed by the Pneumatic School (Athenaios of Attaleia under Emperor Claudius, 41-54 A.D., in Rome) who based their views upon the Stoic doctrine of the *pneuma*.

Even without a detailed discussion of the practices and accomplishments of the various medical schools, it should be evident that with the beginning of the Hellenistic era the art of healing and philosophy became closely allied. This does not mean, however, that the alliance with philosophy

abolished all religious aspects and all traces of the craftsman from the practice of medicine. These not only continued to exist side by side with philosophy, but were welded with it into an entity in the works of the great synthesizer Galen.

Galen’s Eclecticism

In the person of Galen we find all three aspects of his medical predecessors. As an eclectic Galen selected what seemed best to him from among the practices of the philosophical schools of medicine; as a craftsman he strongly believed in the self-advertisement of prognostics. Yet it was neither his brilliant philosophy nor his superb craftsmanship that commended Galen to posterity and helped him dominate the medicine of the Middle Ages. As Charles Singer points out, the reverence shown to Galen by the medieval world is largely due to his teleological beliefs. Galen’s “religion” of teleology was based upon the Aristotelian principle that “Nature does nothing in vain.” With this dictum Galen justified the form and structure of every organ in relation to the function for which he thought it designed. In doing this, he claimed that in every work of Creation—thus also in man’s body—we can demonstrate the Creator’s design along known principles. To the Stoics of Galen’s era, determinism in itself was neither novel nor strange. But Galen’s determinism was a “determinism of perfection,” in which everything was arranged by a wise and far-seeing Creator and was accordingly perfect. Such beliefs naturally interfered with accurate description of the body and its functions and mar the scientific value of Galen’s prodigious writings.

But then, paradoxical as it may seem, complete scientific integrity might have doomed Galen to oblivion. From that he was saved by his religion, for his “determinism of perfection” and his belief in the supreme Creator fitted so completely into the philosophies of Christianity and Islam that his teachings could be taken over by the most devout adherents of both religions without any need for adaptation or change.

With Galen we have reached the end of Greek medicine and the height of its achievement. But the survival of Galen’s works insured a continuity of medical thinking—and it is hardly surprising that the earliest medieval physician appeared in the figure of a priest.